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				Michelle B. Sand	erson	(Depositor's name)
				Michelle B	Sanderson	(Signature)
				Canuary	11,2007	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	Q <sub>TTC</sub>	DRNEY DOCKET NO.	CONFIRMATION NO.
10/719,199	10/719,199 11/21/2003		John E. Campbell	00-RB69(1)		1984
TITLE OF INVENTION: THRU TUBING TOOL AND METHOD						
1						
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	01/11/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS	1		
THOMPSON, KENNETH L		3672	175-230000	•		
1. Change of correspond CFR 1.363).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a sizele from (having as a member as a me			
		ange of Correspondence				
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or ty	ne)		
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
SMITH INTERNATIONAL, INC. HOUSTON, TEXAS						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🚨 Government						
4a. The following fee(s)	are submitted:	4	b. Payment of Fee(s): (Plea	se first reapply any pre	viously paid issue fee si	nown above)
⊠ Issue Fee ☐ A check is enclosed.						
☐ Pablication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached. ☐ Advance Order - # of Copies						ciency, or credit any
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<ol> <li>Change in Entity Sta</li> <li>a. Applicant claim</li> </ol>	tus (from status indicate s SMALL ENTITY stat		☐ b. Applicant is no lon	ger claiming SMALL EN	TITY status. See 37 CFI	R 1 27(a)(2)
			ed from anyone other than t			
Authorized Signature	Shamon	.W.Batis		Date Janua	ry 11, 2007	<u>'</u>
Typed or printed nam				Registration No.		
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